State of Minnesota Senior Leadership Institute

Instructions for Application Letter of Recommendation

Background

The Senior Leadership Institute (**SLI**) focuses on preparing more experienced managers and directors for higher administrative roles in leadership. The ten (10) session Senior Leadership Institute is delivered in partnership with the *University of Minnesota Humphrey Institute of Public Affairs*. The content fosters creativity and innovation in state government and builds leadership skills in a systems context. SLI equips leaders with the tools they need to positively impact the complexity of public issues in today's challenging environment.

Guidelines for Recommendation Letter Content:

A letter of recommendation is required from the agency's Commissioner or Deputy Commissioner, written on department or division letterhead and signed by the Commissioner or Deputy Commissioner (signature may be scanned in if electronically submitted).

The letter must reference the name of the applicant, the name and contact information of the writer and provide specific examples of why the applicant is a good candidate for the Senior Leadership Institute and describe how the applicant exhibits these characteristics in the workplace.

- Considered a thought leader by others
- Actions and decisions characterized by initiative and proactive behavior
- Utilizes emotional intelligence to build effective relationships
- Has established a pattern of noteworthy results
- Perceived to possess the potential for leadership opportunities with greater depth and breadth of responsibilities
- Seeks continuous personal and professional growth
- Values diversity and diverse perspectives
- Is a valued contributor and strong performer in his or her current position
- Demonstrates a strong commitment to utilize knowledge gained in service to the State of Minnesota, both now and in the long term.

The letter should also describe why this person is being recommended for the State of Minnesota Senior Leadership Institute. In other words, how will the applicant, the State of Minnesota, the agency, and/or the work unit benefit if this individual participates?

Only this letter and the application will be considered. Do not send additional letters or materials.

State of Minnesota Senior Leadership Institute Application 2016

Section 1. Applicant Data

Instructions: Complete the application below. Secure the required letter of recommendation. Submit the application and the signed letter via e-mail to eld.training@state.mn.us or hand-deliver/mail them to Senior Leadership Institute, c/o Enterprise Learning & Development, 400 Centennial Building, 658 Cedar St., St. Paul, MN 55155. Applications will be accepted until 3:00 p.m., Monday, June 13, 2016. Receipt will be confirmed via e-mail. If you do not receive a confirmation email within five business days of submission, email us at eld.training@state.mn.us to verify receipt of your application. It is the applicant's responsibility to assure that the application is complete, including signatures on the letter of recommendation.

| Name: |
|--|
| Agency: |
| Current Classification: |
| Working Title: |
| Work Address: |
| Work Phone: |
| E-mail address: |
| Reporting Manager (name and title): |
| Reporting Manager e-mail address: |
| Agency Training Coordinator Name (print or type clearly): |
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| When did you start working for the State of Minnesota? Month Year |
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| Section II. Applicant Response | |
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| Please respond to the following questions, using specific examples when Each answer should be concise, but complete. The length of each responsords. | |
| 1. What qualities do you think will be important in future leaders at the Stat not exceed 250 words.) | e of Minnesota? (Response must |
| 2. How do you exhibit these qualities in the work that you do right now? (Re | sponse must not exceed 250 words.) |
| 3. What are your future aspirations or goals as a state leader? (Response mus | st not exceed 250 words.) |
| 4. What do you hope to gain by the experience of participating in this progra words.) | am? (Response must not exceed 250 |
| 5. How will participating in this program benefit your current employer and exceed 250 words.) | I the state? (Response must not |
| Signature: | Date: |

| : | ecklist: Application completely and clearly filled out (typed or electronically produced) and signed. Application accompanied by signed letter of recommendation ALL application materials are being submitted TOGETHER. |
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